

ORIGINALBRODIE, J.
BLOOM, M.J.FILED
IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.

★ MAR 16 2020 ★

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

BROOKLYN OFFICE

YASMEVA MEHMETI
YASMEVA TRIWANDA WEEKS

Write the full name of each plaintiff.

Det.

-against-

DONALD BRODIE



(To be filled out by Clerk's Office)

COMPLAINT

(Prisoner)

NYPD & NEW YORK
CITY BOARD OF EDUCATION
NEW YORK CITY POLICE
DEPARTMENT OF JUVENILE JUSTICE

Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.

Do you want a jury trial?

 Yes No

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. LEGAL BASIS FOR CLAIM

State below the federal legal basis for your claim, if known. This form is designed primarily for prisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

Violation of my federal constitutional rights

Other: _____

II. PLAINTIFF INFORMATION

Each plaintiff must provide the following information. Attach additional pages if necessary.

First Name <u>YASMEVA</u>	Middle Initial <u>T</u>	Last Name <u>MEHMETI</u>
<u>YASMEVA TRUWANDA WEEKS</u>		

State any other names (or different forms of your name) you have ever used, including any name you have used in previously filing a lawsuit.

*00093684ND

Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)

Current Place of Detention <u>R.M.S.C</u>
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Current Place of Detention

Institutional Address <u>1919 Hazen Street</u>

County, City <u>E.ELMHURST</u>	State <u>NY</u>	Zip Code <u>11370</u>
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III. PRISONER STATUS

Indicate below whether you are a prisoner or other confined person:

Pretrial detainee

Civilly committed detainee

Immigration detainee

Convicted and sentenced prisoner

Other: _____

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:

First Name	Last Name	Shield #
DONALD BROWN		
DETECTIVE 100TH PRECINCT		
Current Job Title (or other identifying information)		
100 RICHMOND TERRACE		
Current Work Address		
SI RICHMOND, NY 10301		
County, City	State	Zip Code
NYC BOARD OF EDUCATION		
First Name	Last Name	Shield #

Defendant 2:

Current Job Title (or other identifying information)		
65 COURT STREET SUITE # 1		
Current Work Address		
BROOKLYN, NY 11001		
County, City	State	Zip Code
NYC DEPT. OF YOUTH & FAMILY SERVICES		
First Name	Last Name	Shield #

Defendant 3:

Current Job Title (or other identifying information)		
110 WILLIAM ST # 14TH FLOOR		
Current Work Address		
NY, NY 10038		
County, City	State	Zip Code
NYPD HEADQUARTERS		
First Name	Last Name	Shield #

Defendant 4:

Current Job Title (or other identifying information)		
Current Work Address		
NEW YORK, NY		
County, City	State	Zip Code

V. STATEMENT OF CLAIM

Place(s) of occurrence:

120th police van ave

Date(s) of occurrence:

Jan 1997 - present

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

I WAS BRUTALLY ATTACK, SEXUALLY,
& PHYSICALLY, AND MENTALLY
ABUSED BY DETECTIVE DONALD
BREWER. IT IS STILL HAUNTING ME UP
UNHAPPILY AND VERY DAY. MY ONLY
FATHER DIED AND LEFT ME HOMELESS
ON MY OWN. HE WAS A BAD WORKER
MO. DETECTIVE DONALD BREWER
WAS A PERSONAL GONE WRONG
INDIVIDUAL WITH NO LIFE. HE WAS
VERY MISERABLE AND DISTURBED.
IT STARTED WHEN HE TOOK ME
TO MR TOLIN COURT HOUSE ALONG
WITH HIS PARTNER OF EDUCATION
MOU. HE DID ME WRONG THAN A
CRUEL PERSON WOULD DO. OR DOG.
I WAS JUST TURNING 13 FROM WEEK
OR 15. I WAS DEVELOPED FOR
MY AGE BUT I COULD NOT OVER
PERSUADE MIGHT OF THE COURIER

BACK THEN HE CONTINUED TO ROCK
MY LIFE FOR YEARS ON COUNTING
CHAS MURDOCK, PHOENIX AND
JUST OUT RIGHT DEVILISH MALEFIC
I DO NOT KNOW WHAT WAS
THE ORIGIN OF THIS BUT HE WAS
A CHILD HE THOUGHT HE COULD
CONTROL ME ONLY HE WAS VERY
CORRUPTED AND A GOOD & DECENT

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

I HAD TRAUMA TO MY MENTAL
HEALTH AND HAD TO DO ENOUGH
LOST OF MEMORY OVER TIME
UNTIL CURRENT. I DO NOT FEEL
READY TO TALK ABOUT IT AS IT
SHOULD BE IN MY OWN TIME & PACE

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

THEY IS NO AMOUNT OF CURRENCY/
MONEY TO COMPENSATE FOR WHAT
I WILL NEVER GET BACK.
AMOUNT OF MONEY FOR 24/7
YEAR OF TRAUMA AND PAIN
SUFFERING. HE DID TOO MUCH
UNHAPPY. HE KILLED ME. HE
TOOK MY LOVED ONE AWAY FOREVER.

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

3/2/2020

Dated:

YAHMEO

First Name

Middle Initial

Plaintiff's Signature

MUHMETI

Prison Address

County, City

Last Name

State

Zip Code

Date on which I am delivering this complaint to prison authorities for mailing:

3/2/2020

16/20 Page 7 of 7 PageID#.: 7
YASR
R. M. G. C.
19-19 Hazen Street
E. Elmhurst, N.Y. 11371



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MAR 16 2009

BROOKLYN OFFICE

FBI

EASTERN DISTRICT OF NEW YORK
225 COMMON POKE
ROCKVILLE CENTRE 11201
ATTORNEY'S OFFICE
MAILING CLERK

